San Bernardino County CSS WORK PLAN CSS Plan – 2005-06, 2006-07, 2007-08

Exhibit 4

Program Work Plan Name: CIRCLE OF CARE: SYSTEM DEVELOPMENT

Work Plan Number - OA-1

Program Description:

San Bernardino County has developed an array of services for Older Adults that struggle with severe mental illness (SMI). These services include:

- Expand mental health treatment and case management services
- Expand the Senior Peer Counseling program
- To provide treatment, education and assistance
- Enhance existing Senior Peer Counseling program
 - With a focus on wellness and recovery
 - o To assist older adults in remaining independent and active
 - To pursue individualized personal goals

This program is to lay the foundation for the Full Service Partnership (Plan 2) to be implemented in Year 2.

Priority Populations:

- Unserved and underserved Older Adults (60 years and older)
 - o Who are isolated and may be in declining health
 - o Because of stigma,
 - Lack of transportation
 - o Lack of awareness of availability of services

According to prevalence data, Euro-Americans and Latino older adults make up the most underserved population. Significant efforts will be made to work with these identified groups.

The number of clients projected to receive services annually is 90 under System Development 55 under Outreach and Engagement for a total of 145.

Older Adults	Unserved, Underserved or Inappropriately Served
African-American	11%
Asian-American	10%
Euro-American	48%
Latino	23%
Native-American	1%
Other	7%

Strategies:

#	Name and Description	Fund Type			Budget		
		FSP	SD	OE	Expense	Revenue	Net CSS
	 Increase staff to extend to diverse populations of older adults not currently receiving mental health and case management services. Provide services to all who meet the unserved/underserved criteria. Assure that mental health services will be delivered in a manner that is culturally, racially, ethnically, and age-cohort appropriate. Provide ongoing education, linkage and consultation related to insurance and SSI benefits for the Transitional Age Older Adult population (ages 55-59) and for those Older Adults 60-65 years that may need assistance in obtaining benefits. Link those interested in employment to programs, such as Vocational Rehabilitation, DAAS Senior Employment Program, and State of California Employment Development Program. The AGEWISE Senior Peer Counselor 		X	X	\$1,277,199	\$350,696	\$926,503

Program provides facilitation of peer support groups in the High Desert and East Valley regions of San Bernardino County. Expand the existing Senior Peer Counseling Program to provide mental health counseling with the focus on wellness and recovery and to include the following: outreach and engagement to groups in communities throughout the county, facilitation of support groups for consumers, families, and caregivers, social service referrals, advocacy, telephone support and referral with implementation of a "Warm Line" (telephone program to those who are isolated and in need of emotional support) and provide education to the community regarding older adult mental health issues to reduce the stigma about mental illness. AGEWISE Senior Peer Counselors will provide in-home supportive peer counseling to older adults suffering from situational difficulties related to aging (i.e. bereavement, caregiver stress, grandparent raising grandchildren, coping with physical decline, etc.). Will recruit and train volunteers form vari9ous geographical regions with special attention to racial, ethnic, and cultural representation. Bilingual volunteers will be recruited. Training for Primary Care Physicians on evidence-based and promising clinical practices for coordination and integration of mental health and primary care, covering clinical practices guidelines, screening and protocols (particularly assessment depression and suicidality), chronic disease management, and cultural competence.

of evidence-based treatment models such as the IMPACT model, which identifies and treats in primary care physicians" offices those older adults with depression, who may be particularly at high risk for suicidality, and Promotores Model, a healthy aging program targeting Latino populations. • Capacity-building component in which specific modules of training, consultation, and mentoring regarding important areas related to older adult mental health concerns will be provided by community agencies with specific expertise (e.g. Alzheimer's Association, Inland Caregiver Resource Center, Department of Aging and Adult Services (DAAS). Training that is responsive to the needs of new and existing staff, volunteers, and community partners will be developed by DBH to identify the most urgent areas of training needed. A technical assistance network comprised of community experts in the field of geriatric mental health and older adult issues will act as consultants and mentors to individual staff with challenging care cases and participate in multidisciplinary team meetings. • Develop/purchase a range of information and educational tools for distribution to users of AGEWISE services, their families, and other support persons and for distribution to professionals in allied health fields (i.e. M.D.'s, clinics, Public Health, churches, etc.)